## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000009567

FILED Jun 22, 2008 Secretary of State

Entity Name: MID-FLORIDA CAVALIER KING CHARLES SPANIEL CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 18124 CADENCE STREEET ORLANDO, FL 32820 **Current Mailing Address: New Mailing Address:** 18124 CADENCE STREEET ORLANDO, FL 32820 FEI Number: 59-3496388 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, ROGER 18124 CADENCE STREEET ORLANDO, FL 32820 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition JOHNSTON, KALA Name: Name: 9350 LISTOW TERRACE Address: Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition POPE, MALINDA Name: SCHULER, TINA Name: Address: 11558 MONETTE ROAD Address: P.O. BOX 33337 City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: INDIALANTIC, FL 32903 Title: SEC () Delete Title: SEC (X) Change ( ) Addition BARKOW, LISA LAWRENCE, LISA Name: Name: 18124 CADENCE STREEET 13219 SUMMER RAIN DR Address: Address: City-St-Zip: ORLANDO, FL 32820 City-St-Zip: ORLANDO, FL 32828 Title: TREA ( ) Delete Title: TREA (X) Change ( ) Addition Name: ROMANINI, CAROLE Name: BARKOW, LISA 1224 HANCOCK BRIDGE PKWY 18124 CADENCE STREET Address: Address: City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: ORLANDO, FL 32820 Title: () Delete Title: ( ) Change (X) Addition SMITH, ROGER Name: Name: 18124 CADENCE STREET Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32820

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER SMITH BOD 06/22/2008